



AFTER FINAL

PATENT

COPY OF PAPER #6

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

A M E N D M E N T

Applicant: Roger P. Jackson

Serial No.: 09/588,924

Date: October 18, 2002

Filed: June 6, 2000

Group Art Unit: 3731

Exam: Daniel J. Davis

For: REMOVABLE MEDICAL IMPLANT CLOSURE FOR OPEN HEADED IMPLANTS

Kansas City, Missouri

Assistant Commissioner for Patents

Washington, D.C. 20231

Sir:

Kindly consider the following:

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OCT 31 2002

TECHNOLOGY CENTER R3700

REMARKS:

The Office action mailed July 19, 2002 has been received and carefully considered. Reconsideration of the application for which a final rejection has been entered is respectfully requested as it is urged that acceptance of this amendment under Rule 116 may prevent the need for appeal or place arguments in the file which will make the application easier to understand on appeal.

The claims stand rejected on the basis of Gourney alone or

Case Docket No.: 00,063



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Original by Fax Date: October 18, 2002

PATENT

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In re application of: Roger P. Jackson

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ASSISTANT COMMISSIONER FOR PATENTS
Washington, D. C. 20231

TECHNOLOGY CENTER R3700

Sir:

Transmitted herewith is an Amendment in the above-identified application with the following documents:

☒ Small Entity Status of this application has been previously established and continues.☐ Request for Extension of Time and fee are enclosed.☒ No additional filing fee is required.☒ The fee has been calculated as shown below:

| | | | SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
|----------------------------------|---------------------------------|---------------|--------------|-----------|-------------------------|-----------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDL. FEE | RATE | ADDL. FEE |
| TOTAL 13 | Minus 13 | = 0 | x 9 | = \$ | x 18 | = \$ |
| INDEP 3 | Minus 3 | = 0 | x 42 | = \$ | x 80 | = \$ |
| TOTAL FEE | | | \$ 0 | | \$ | |

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☐ Please charge Deposit Account No. 50-1253 in the amount of \$_____.
A duplicate copy of this sheet is attached.☐ A Check in the amount of \$_____ is attached.☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1253. A duplicate copy of this sheet is attached.☒ Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.☒ Any patent application processing fees under 37 C.F.R. 1.17.

Respectfully submitted,

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